2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006004

Entity Name: THE EASTERN COMPANY

FILED Jan 12, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 112 BRIDGE STREET NAUGATUCK, CT 06770 **Current Mailing Address: New Mailing Address:** P.O. BOX 460 NAUGATUCK, CT 06770 FEI Number: 06-0330020 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CFOP () Delete Title: () Change () Addition Name: LEGANZA, LEONARD F Name: 112 BRIDGE STREET Address: Address: City-St-Zip: NAUGATUCK, CT 06770 City-St-Zip: VCFO Title: Title: () Delete VCFO (X) Change () Addition Name: SULLIVAN, JOHN L II Name: SULLIVAN, JOHN L III. 112 BRIDGE STREET 112 BRIDGE STREET Address: Address: NAUGATUCK, CT 06770 City-St-Zip: City-St-Zip: NAUGATUCK, CT 06770 Title: () Delete Title: () Change () Addition FINELLI, GENE A Name: Name: 112 BRIDGE STREET Address: Address: City-St-Zip: NAUGATUCK, CT 06770 City-St-Zip: Title: () Delete Title: () Change () Addition DEWS, THERESA P Name: Name: Address: 112 BRIDGE STREET Address: City-St-Zip: NAUGATUCK, CT 06770 City-St-Zip: Title: Title: CAO () Delete () Change () Addition SAPACK, KENNETH R Name: Name: 112 BRIDGE ST Address: Address: City-St-Zip: NAUGATUCK, CT 06770 City-St-Zip: Title: () Delete Title: (X) Change () Addition MELKUS, THOMAS D Name: Name: KAY, BRIAN Address: 301 W HINTZ RD Address: 21944 DRAKE ROAD City-St-Zip: WHEELING, IL 60090 City-St-Zip: STRONGSVILLE, OH 44136

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GENE A. FINELLI T 01/12/2009